

Minutes of the Board of the South Eastern Sydney Local Health District

Date:	Wednesday, 27 September 2023
Time:	4:00pm – 7:00pm
Location:	Heritage Boardroom, Level 1 Admin Block, Sydney/Sydney Eye Hospital, 8 Macquarie Street, SYDNEY NSW 2000
Present:	Dr Deb Graves (Board Chair) Arthur Diakos * (<i>TEAMS</i>) Anna Guillan Elli Baker Dr Gregory Levenston Dr Jan Dudley Dr John Estell
Ex Officio	Tobi Wilson, Chief Executive (CE)
Invitees:	Kim Olesen, Executive Director Operations Ian Anderson, Director, Finance Dr John Shephard, A/Director, Clinical Governance and Medical Services
Guests:	Tayla Vella, Voluntary Assisted Dying Project Manager Dr Patrick Bolton, Complex Care Physician / Voluntary Assisted Dying Medical Lead Dr Rebecca Cregan, Co-Chair, SESLHD Environmental Sustainability Steering Committee / NSW Health Anaesthetics Net Zero Lead Linda Walsh, Environmental Sustainability Project Officer Natalie Tuffin, Planning and Partnership Lead Lisa Altman, Director, Strategy, Innovation & Improvement Sharon Carey, General Manager, Corporate Services * William de Montemas, Management Trainee OCE (observer)
Apologies:	Allan Spigelman, Board Member Helene Orr, Board Member Liam Harte, Board Member Jonathan Doy, Board Member Dr Jo Karnaghan, Director, Clinical Governance and Medical Services Kate Hackett, Director, Nursing and Midwifery Services Grant Eruini-Bennett, Chair, Medical Staff Executive Council
Secretariat:	Carrie Han, Executive Assistant to the CE / Board Secretary

1. Opening

1.1 Acknowledgement of Country

An acknowledgement of country was shared.

1.2 Present and Apologies

Apologies were noted by the Board. The chair declared that a quorum was present and the meeting opened at 4:45pm.

1.3 Declaration of Interests

Conflict of Interest Declaration Register was tabled. No new conflicts of interests to declare or to be added/removed in the Register at this meeting.

1.4 Guest Presentation – Voluntary Assisted Dying

The Board welcomed Ms Tayla Vella and Dr Patrick Bolton to join the meeting as guest presenters. It is noted that NSW Parliament passed the *Voluntary Assisted Dying (VAD) Act 2022* on 19 May 2022, which will allow eligible people the choice to access VAD in NSW from 28 November 2023.

Dr Bolton and Ms Vella provided a patient story and an overview of the VAD, including the statistics and projections, eligibility criteria for a person to access VAD, authorised VAD practitioners and state-wide VAD services.

The proposed process and updates on VAD implementation in NSW Health and SESLHD were discussed. The Board noted the risks and challenges identified with SESLHD setting up and providing the VAD service. CE advised SESLHD's proposed model of care for VAD, including staffing and funding has been presented to NSW Chief Health Officer and Deputy Secretary, Population and Public Health.

There were discussions around the VAD model of care pathways, noting other Health services are available to provide support needed at end of life, including palliative care. The Executive Director Operations advised specific governance arrangements and processes are put in place to ensure safe and effective clinical implementation, noting the District will actively engage and work with the community and a broad range of health, aged care and other stakeholders during the implementation period.

1.5 Minutes of Previous Meeting

The minutes of the previous meeting were tabled and reviewed by the Board.

Resolution: The Board resolved that the minutes of the previous meeting held on 30 August 2023 be signed as a true and correct record of the meeting.

1.6 Actions from previous meeting

The action log was tabled in the papers and taken as read.

Resolution: The Board notes the information provided.

2 Committees

2.1 Finance and Performance (F&P) Committee

Draft minutes of the meeting held on 28 August 2023 were tabled in the papers and taken as read.

Resolution: The Board notes the information provided.

2.2 Quality and Safety Board Committee (QSBC)

Draft minutes of the meeting held on 7 September 2023 were tabled in the papers and taken as read. Dr Greg Levenston, Chair of the QSBC provided a summary of the meeting, highlighting the trust given by the Community and patients, the comprehensive and high quality reports provided to the Committee and a recommendation made for each facility to showcase a positive initiative at future QSBC meetings. Investigations of reported harm score incidents are underway with no significant concerns identified.

Resolution: The Board notes the information provided.

2.3 Audit and Risk Committee

It is noted that there are no minutes for this month.

2.4 Board Strategic Community Partnerships Committee (BSCPC)

It is noted that there are no minutes for this month.

3 Matters for Noting

3.1 Correspondence Register

The correspondence register was provided, including a letter from the Secretary NSW Health regarding the SESLHD Service Agreement FY2023-24.

Resolution: The Board notes the information provided.

4 Standing Items

4.1 Chief Executive Report

The Chief Executive's Report was tabled and taken as read, including updates on following matters:

- Appointment of Mr Chris Hay as the General Manager, SESLHD Mental Health Service.
- People Matter Employee Survey completion rate is 44% for SESLHD this year, noting a summary of the results with actions plan will be provided to the Board upon completion.
- SPHERE Partnership agreement is under review, noting the contributions for SESLHD has been revised.
- St George Hospital accreditation, with positive feedback received from The College of Intensive Care Medicine of Australia and New Zealand.

Resolution: The Board notes the information provided.

4.2 Patient Story

The Patient Story provided by Mental Health Services was noted.

Resolution: The Board notes the information provided.

4.3 Board Chair Report

A verbal report was provided by the Board Chair, including the UNSW Health Translation Hub Sod Turn event which was attended by Mr Jonathan Doy.

Resolution: The Board notes the Chair's report.

5 New Business

5.1 Paper - SESLHD Environment Sustainability Plan 2023-25

The Board welcomed Dr Rebecca Cregan and Ms Linda Walsh to the meeting to present the SESLHD Environment Suitability Plan 2023-25. The guest presenters highlighted the importance of environment sustainability in Health and advised the SESLHD Environment Sustainability Plan 2023-25 has been drafted through the SESLHD Environmental Sustainability Steering Committee and informed by extensive consultation with SESLHD staff, consumers and key stakeholders, Ministry of Health (MoH)/NSW Government key performance indicators (KPIs) and learnings from the United Kingdom National Health Service and Australian carbon hotspots.

The plan format is a one-page communication poster, highlighting its three foundations – Sustainable Clinical Services, Resource Efficiency and Resilient Facilities. There were detailed explanations and discussions around the focus areas (including waste, transport and fleet and new builds) and the foundational initiatives for each of the focus area. Drivers to reach targets for MoH/NSW Government Environment Sustainability related KPIs were also discussed, noting key initiatives with tailored programs are being developed and implemented across the District.

The SESLHD Environment Sustainability Plan 2023-25 will be used to communicate SESLHD Environmental Sustainability ambitions and focus areas to staff, partners and consumers for the next two years across different platforms and will be an opportunity to engage with staff on environmental sustainability and focus action on the key priority areas.

Resolution: The Board resolves to endorse the SESLHD Environmental Sustainability Plan 2023-25.

5.2 Paper – SESLHD Clinical Services Plan

A paper detailing the missions, priorities and actions for the SESLHD Clinical Services Plan (CSP) was provided to the Board for discussion and endorsement, with a presentation delivered by Ms Natalie Tuffin, Planning and Partnership Lead. The presentation demonstrated the purpose and context of the CSP, estimated timeline and contents of the plan, noting a key component of the timeline of the CSP development is review and endorsement of the missions, priorities and actions in September 2023. The Case for Change in the CSP outlines the key challenges SESLHD is currently facing and will encounter over the next ten years. The Case for Change is organised around four key missions for SESLHD that will guide decisions on clinical service delivery, investment and resource allocation over the next ten years. Each mission, priority and key action illustrates how SESLHD will transform service delivery over the life of the CSP.

CE and Director, Strategy, Innovation and Improvement advised the development of the CSP has included extensive consultation with staff including clinical representatives, consumers and key stakeholders. The staff, community and partner forums have provided further opportunity to reshape the CSP. The CSP will provide the strategic directions over a ten-year timeframe, to guide decision making, including addressing the challenges presented from the SESLHD Service Agreement FY2023-24. The SESLHD CSP has been shared with MoH, noting the CSP development provides opportunity to identify and resolve system-wide problems with all LHDs working in a collaborative way. There was discussion about the terminology of “Actions” under “Missions, Priorities and Actions”, noting a recommendation to consider “Guiding Principles” instead. A recommendation to include Partnership with GPs as a priority was also noted for consideration.

Resolution:	The Board noted and discussed the missions, priorities and actions for the SESLHD Clinical Services Plan with feedback.
Action:	The Planning and Partnerships Team to review the terminology of “Actions” in the CSP and consider including “Partnership with GPs” as a priority.

5.3 Paper – Community Health Review

A paper describing the recommendations of the Community Health Review was provided to the Board for noting. The CE advised a review of SESLHD Adult Community Health Services was undertaken as a rapid 11-week project to examine governance, models of care and service delivery as they relate to hospital avoidance and early discharge programs. The review identified 11 impact areas with recommended actions associated with each of those areas, as well as a horizon timeline setting out proposed timeframes. To deliver on the recommendations of the final report, a workshop will be held before the end of 2023 for stakeholders to agree the future vision and direction, prioritise and map appropriate time frames for each of the agreed recommendations.

Resolution:	The Board notes the recommendations of the Adult Community Health Services review.
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5.4 Paper - Annual review of Audit and Risk Committee Charter

A paper regarding the Audit and Risk Committee (ARC) Charter was provided to the Board for endorsement. It is noted that the charter of the SESLHD ARC is reviewed annually. No significant changes to the charter were recommended.

Resolution:	The Board resolved to approve the charter of the SESLHD ARC.
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5.5 Paper - Strategic Asset Management Plan, Asset Management Plan and Capital Investment Plans

A paper detailing the Strategic Asset Management Plan (SAMP), Asset Management Plan (AMP) and Capital Investment Plans (CIPs) was provided. CE advised the SESLHD 2023 SAMP, AMP and CIPs have been completed in accordance with the templates issued by MoH in conjunction with Health Infrastructure.

Resolution: The Board notes the information provided.
Action: To add the relevant documents to the Board Resource Centre in Diligent Board.

5.6 Paper – SESLHD Service Agreement with Ministry of Health FY2023-24

A paper detailing the SESLHD Service Agreement (SA) with MoH FY2023-24 was provided, including a presentation delivered by the Director of Finance (DoF).

DoF advised the FY2023-24 SA for SESLHD was issued on 19 September 2023 for Executive and Board review, which supersedes the interim funding allocation issued previously for the period from 1 July 2023 to 30 September 2023. Key obligations from the SA include:

- The agreement is due to be signed and returned to MoH by 28 October 2023.
- The District is required to identify productivity, revenue and expense strategies to achieve on budget performance and submit Efficiency Improvement Plans (EIPs) by 31 October 2023.
- The executed version of the agreement is to be published on SESLHD website by 11 November 2023.
- Service and Facility level budget should be published on SESLHD website no later than 30 November 2023.

The DoF provided a summary of the overall budget context for NSW Health, followed by the key features and budget elements of the FY2023-24 SESLHD SA, including the SESLHD expenditure budget, revenue budget, allocated savings from the Comprehensive Expenditure Review and whole of government savings requirements and SESLHD saving strategies and initiatives. It is noted that further advice regarding comprehensive budget supplementation is due from MoH by the end of September.

The Board noted the significant financial challenges the SA presents. Discussions were held about the SESLHD budget risks for FY2023-24, including the Safe Staffing funding initiative and the additional funding for TACP which assumes 100% occupancy.

The CE advised the SA sets out performance accountabilities for SESLHD for FY2023-24, measured through KPIs against which the organisation's performance will be monitored by MoH. Detailed analysis of the service agreement is underway and a more detailed response will be provided to the Board at the 25 October 2023 meeting. The Board agreed on the draft SESLHD response to be provided to SESLHD Finance and Performance Committee for review prior to the Board.

Resolution: The Board notes the information provided.
Action: Draft SESLHD response to MoH regarding the FY2023-24 SA to be provided to the Finance and Performance Committee prior to being tabled at October 2023 Board meeting.
Action: To review TACP occupancy rate in SESLHD.

6 Regular Reporting

6.1 Finance Report

The Finance report was tabled and taken as read.

Resolution: The Board notes the Finance Report.

6.2 Operations Report

The Operations report was tabled and taken as read, including updates on medical imaging review, the District's elective surgery and ED performance, clinical streams, pharmacy services, VAD and all facilities. A corporate services update was included.

Resolution: The Board notes the Operations Report.

6.3 Performance Report

It is noted that there is no Integrated Performance Report for this month. MoH League Table for July 2023 was tabled and noted by the Board.

Resolution: The Board notes the information provided.

6.4 Capital Works Report

The Capital Works report was tabled and taken as read.

Resolution: The Board notes the Capital Works Report.

6.5 Safety and Quality report

The Clinical Governance report was tabled and taken as read. A/Director, Clinical Governance and Medical Services advised improvement was seen with the District's overall Hospital Acquired Complications performance.

Resolution: The Board notes the Clinical Governance Report.

7 Meeting Finalisation

7.1 Business Without Notice

There was no business without notice.

7.2 Noting of Confidential Items

There were no confidential items raised.

7.3 Next Meeting

The next Board meeting is scheduled for **Wednesday, 25 October 2023** at Boardroom, Level 1, Admin Block, Sydney/Sydney Eye Hospital, 8 Macquarie Street, SYDNEY NSW 2000.

7.4 Close

The meeting closed at 7:10pm.

I certify that the foregoing is a true and correct copy of the minutes approved by Members of the Board.



**Board Chair
Dr Debra Graves**